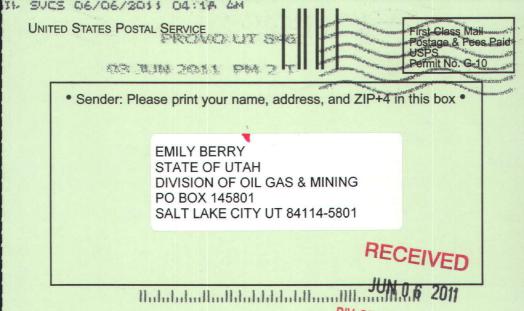
## SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: □ No If YES, enter delivery address below: 0 E. 400 S **BOYD BROTHERSON** MT Pleasant UT 450 E 200 N **MOUNT PLEASANT UT 84647** 3. Service Type ☐ Certified Mail ☐ Express Mail Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 5103910024 6-1-11 2. Article Number 0007 4203 1812 3410 (Transfer from service label)



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